

CLAIMS ONLY						Application Number	Filing Date	
						10/707468		
						Applicant(s)		
						* May be used for additional claims or amendments		
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1						51		
2						52		
3						53		
4						54		
5						55		
6						56		
7						57		
8						58		
9						59		
10						60		
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12						62		
13						63		
14						64		
15						65		
16						66		
17						67		
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32						82		
33						83		
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36						86		
37						87		
38						88		
39						89		
40						90		
41						91		
42						92		
43						93		
44						94		
45						95		
46						96		
47						97		
48						98		
49						99		
50						100		
Total Indep			2			Total Indep		
Total Depend			13			Total Depend		
Total Claims			15			Total Claims		